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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. SON-2792			
		First Inventor Manabu UCHINO			
Title		ARITHMETIC APPARATUS AND ARITHMETIC METHOD			
		Express Mail Label No.			
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450			
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small></p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages] 28</p> <p style="margin-left: 20px;">(preferred arrangement set forth below)</p> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets] 7</p> <p>5. Oath or Declaration [Total Sheets] 2</p> <p>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)</p> <p>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>		<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p>b. Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper </p> <p>c. <input type="checkbox"/> Statements verifying identity of above copies</p>			
ACCOMPANYING APPLICATIONS PARTS					
<p>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement [when there is an assignee] <input type="checkbox"/> Power of Attorney</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 [] Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other: _____</p>					
<p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____</p> <p>Prior application information: Examiner _____ Art Unit: _____</p> <p>For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>					
19. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		23353			
		<input type="checkbox"/> Correspondence address below			
Name	RADER, FISHMAN & GRAUER PLLC Ronald P. Kananen				
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Signature				Date	July 24, 2003

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FEE TRANSMITTAL for FY 2003		<i>Compl te if Known</i>				
Effective 01/01/2003, Patent fees are subject to annual revision.		Application Number Not Yet Assigned Filing Date July 24, 2003 First Named Inventor Manabu UCHINO Examiner Name Not Yet Assigned Art Unit N/A Attorney Docket No. SON-2792				
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27						
TOTAL AMOUNT OF PAYMENT		(\$) 750.00				
METHOD OF PAYMENT (check all that apply)						
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account						
Deposit Account Number	18-0013					
Deposit Account Name	Rader, Fishman & Grauer PLLC					
The Director is hereby authorized to: (check all that apply)						
<input checked="" type="checkbox"/> Charge fee(s) indicated below		<input checked="" type="checkbox"/> Credit any overpayments				
<input type="checkbox"/> Charge any additional fee(s) during the pendency of this application						
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.						
FEE CALCULATION						
1. BASIC FILING FEE						
Large Entity	Small Entity					
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description		Fee Paid
1001	750	2001	375	Utility filing fee		750.00
1002	330	2002	165	Design filing fee		
1003	520	2003	260	Plant filing fee		
1004	750	2004	375	Reissue filing fee		
1005	160	2005	80	Provisional filing fee		
		SUBTOTAL (1)		(\$)		750.00
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE						
Total Claims		Extra Claims	Fee from below	Fee Paid		
5		-20** =		0.00		
Independent Claims		2	-3** =		0.00	
Multiple Dependent						
Large Entity	Small Entity					
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description		
1202	18	2202	9	Claims in excess of 20		
1201	84	2201	42	Independent claims in excess of 3		
1203	280	2203	140	Multiple dependent claim, if not paid		
1204	84	2204	42	** Reissue independent claims over original patent		
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent		
		SUBTOTAL (2)		(\$)		0.00
** or number previously paid, if greater; For Reissues, see above						
*Reduced by Basic Filing Fee Paid						SUBTOTAL (3) (\$)
						Complete (if applicable)
Name (Print/Type)	Ronald P. Kahanan		Registration No. (Attorney/Agent)	24,104		Telephone (202) 955-3750
Signature				Date	July 24, 2003	

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Ronald P. Kahanan	Registration No. (Attorney/Agent)	24,104	Telephone (202) 955-3750
Signature			Date	July 24, 2003